U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a collection of information unless it displays a valid OMB control number.				
Application Number				
Filing Date	20 August 2003			
First Named Inventor	Matthews			
Title	Foam Dispenser			
Art Unit				
Examiner Namo				
Attorney Docket Number	14421			

u	ppoint:					
	ctitioners at Custome	er Number: 000293				
OR						
Practitioner(s) named below:						
	Name		Registration Number			
Ra	Ralph A. Dowell		26.868	26 868		
	Nancy E. Hill			41,564		
Ly	nn C. Schi	ımacher	36,413	·		
We	endy M. Sla	ade	53 604	-		
as my/our	attomey(s) or agent(s) to prosecute the application identified	above, and to tra	ansact all business ir	the United States Patent and	
rageman	k Office connected th	erewith.		· · · · · · · · · · · · · · · · · · ·		
Please recognize or change the correspondence address for the above-identified application to:						
	The above-mentioned	i Customer Number:				
OR				 1		
ш.	The address associat	ted with Customer Number:				
OR						
211						
x	Firm or Individual Name	Ralph A. Dowell	C			
Add	Firm or Individual Name dress		·C.			
Add	Firm or Individual Name dress dress	DOWELL & DOWELL, P Suite 309		va v		
Add Add City	Firm or Individual Name dress dress	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav		_	Zip 22202	
Add Add City Cou	Firm or Individual Name dress dress y untry	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US	is Highw	ay VA	Zip 22202	
Add Add City Cou	Firm or Individual Name dress dress dress dress dress dresp dress dresp dress dresp dress dresp	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington	is Highw	_	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add Add City Cou Tele I am the:	Firm or Individual Name dress dress dress dress dress dresp dress dresp dress dresp dress dresp	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US	is Highw State	VA	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add Add City Cou Tele I am the:	Firm or Individual Name dress dress dress dress dress dresp dress dresp dress dresp dress dresp	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US	is Highw State	VA	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add City Cou Tele I am the:	Firm or Individual Name dress	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US	is Highw State Fax	VA	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add City Cou Tele I am the:	Firm or Individual Name dress	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US 703 415 2555	is Highw State Fax 96)	703 4 15	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Addo Addo City Coo. Tele I am the: X A	Firm or Individual Name dress	DOWELL & DOWELL, P Suite 309 1215 Jefferson Dav Arlington US 703 415 2555 the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/	is Highw State Fax 96)	703 4 15	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add Add City Cou Tele I am the: X A	Firm or Individual Name dress	DOWELL & DOWELL, P. Suite 309 1215 Jefferson Dav. Arlington US 703 415 2555 the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/	is Highw State Fax 96)	703 4 15	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Addo Addo City Coo. Tele I am the: X A	Firm or Individual Name dress	DOWELL & DOWELL, P. Suite 309 1215 Jefferson Dav. Arlington US 703 415 2555 the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/	is Highw State Fax 96)	703 4 15	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Add Add City Cou Tele I am the: X A S Name Signature Date NOTE: Sign	Firm or Individual Name dress	DOWELL & DOWELL, P. Suite 309 1215 Jefferson Dav Arlington US 703 415 2555 the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/SIGNATURE of Applicantly Matthews	is Highw State Fax 96)	703 415 f Record	2559	

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	FOAM DISPENSER WITH RIGI	D CONTAINER			
As the below named inventor(s), I/we declare that:					
This declaration is directed to:					
	The attached application, or				
	Application No.	_, filed on,			
	as amended on	(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVENTOR(S)					
Inventor one: Shaun Kerry Matthews					
Signature:	Citizen of:	UK			
Inventor two:					
Signature:	Citizen of:				
Inventor three:					
Signature:	Citizen of:				
Inventor four:					
Signature:Citizen of:					
	anton on a local annual division to the				

Additional inventors or a legal representative are being named on additional form(s) attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.